

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/073,826</u>	Examiner : <u>Philogene</u>	GAU : <u>3732</u>
From: <u>J. Robbins</u>	Location: <u>IDC</u> FMF FDC	Date: <u>2-9-06</u>
Tracking #: <u>Epm 10073826</u>		Week Date: <u>11-7-05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please verify if A. NA and CLM 12-5-05  
(312 amendment) are to be printed, if so, please provide a  
new index/ITEM form which shows the re-allowance of claims  
5 and 10 (original).

If amendment is not to be entered, then  
original claim 15 in clm 7-25 will depend on canceled  
original claim 5.

Thank You  
[Signature]

[XRUSH] RESPONSE: \_\_\_\_\_

Done!

INITIALS: [Signature]

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
 REV 10/04